



Water Resources Program

Application for a Water Right Permit

For Ecology Use
(Date Stamp)



☐ SURFACE WATER ☒ GROUND WATER ☒ PERMANENT

☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

Follow the attached instructions. Attach additional sheets as necessary.

***A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

Applicant/Business Name: Oren Development, LLC.	Phone No: 206-232-1882	Other No:
Address: c/o Maizel and Assoc., 9311 SE 36th Street #112		
City: Mercer Island	State: WA	Zip: 98040
Email Address (optional): greenlake60@gmail.com		

Contact Name (if different from above): Joe Mentor, Jr.; Jessica Kuchan Mentor Law Group PLLC	Phone No: 206-838-7650	Other No:
Relationship to Applicant: Attorney representing seller of mitigation water		
Address: 315 Fifth Ave S., Ste 1000		
City: Seattle	State: WA	Zip: 98104
Email Address (optional): mentor@mentorlaw.com; kuchan@mentorlaw.com		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: Same	Phone No:	Other No:
Address:		
City:	State:	Zip:
Email Address (optional):		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Obtain Water Right Permit based on mitigation from Court Claim No. 05259 (Suncadia, LLC). This application is for the Upper Kittitas County area. Under WAC 173-539A-060, Ecology can expedite the processing of this application.

Anticipated length of time to complete your project: 15 years

For Ecology Use	APPLICATION NO: <u>64-35540</u>	SEPA: Exempt/Not Exempt
	Fee Paid: <u>50⁰⁰ 022412</u> Check No: <u>2183</u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <u>02-24-2012</u> By <u>[Signature]</u> WRIA: <u>39 Kitt</u>

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Domestic for 1 residence	33 gpd		0.392 (0.12 (CU))	Continuously
Irrigation for 500 s.f.	33 gpd		0.022 (0.019 (CU))	Seasonal
TOTAL:	33 gpd		0.414 (0.137 (CU))	

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

SEE AMENDMENT via
E-MAIL DATED 4-19-12
CQ

Section 3. POINT OF DIVERSION OR WITHDRAWAL
(Complete A or B, and C below)

A.) If Surface Water Source				B.) If Ground Water Source			
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____				<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____			
Source Name: _____				Well diameter & depth: 6"; 124.5' _____			
Tributary to: _____				Number of proposed points of withdrawal: 1			
Number of proposed diversion points: _____				Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO				If available, attach Water Well Report and pump test.			
				Well Tag ID No. APG-192			
C.) Points of Diversion/Withdrawal – Legal Description							
Parcel No.	¼	¼	Section	Township	Range	County	
953358 & 953359		NE	7	19N	15E	Kittitas	
Lot(s)	Block(s)		Subdivision				
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ Feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section _____.							
Parcel No.	¼	¼	Section	Township	Range	County	
Lot(s)	Block(s)		Subdivision				
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section _____.							

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO

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	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date _____ By _____ WRIA: _____

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO
Provide the owner name(s), address, and phone number:

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

Lot 1 of CARMEL VIEWS PLAT, according to the Plat recorded in volume 11 of
Plats at page(s) 24 through 25, records of Kittitas County, Washington.

¼	¼	Section	Twp.	Range	County	Parcel No.
	NE	7	19N	15E	Kittitas	953358

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO
Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): Water for one single family home.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: <u>1 (as part of Group B System)</u>	Present population to be served water: _____
Type of connections: <u>residential</u> (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved <u>05/05/2009</u> Water System Number: <u>AC325</u>	
Name of water system: <u>Carmel Views</u>	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO -- NA	
If yes, explain why you are unable to connect to the system: _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 0.011 ACRES
NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: NA

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: NA

Family Farm Water Act (RCW 90.66):

- Calculate the acreage in which you have a controlling interest, including only:
- Acreage irrigated under water rights acquired after December 8, 1977,
 - Acreage proposed to be irrigated under this application, and
 - Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No:

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head NA and proposed capacity in kilowatts:

Describe works:

Indicate all uses to which power is to be applied:

FERC License No:

Mining/Industrial Use

Describe use, method of supplying and utilizing water: NA

Other Use

NA

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site:

From I-90: Take Cle Elum exit; Turn left toward 4th St./S. Cle Elum Way; Turn left at 4th St/S Cle Elum Way;
Continue to follow S. Cle Elum Way; Turn right at Madison Ave.; Take the 2nd left onto 6th St; Turn right at Marie
Rd; Continue onto Westside Rd; Left on Woods and Steele Road; Left on Chandler Rd; Left on Carmel Views.

Site Address: Unknown

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Allon Shoval
Print Name
(Applicant or authorized representative)


Signature

2-17-2012
Date

Oren Development, LLC
Print Name
(Legal Owner or Part Owner Place of Use)


Signature

2-17-2012
Date

Print Name
(Legal Owner or Part Owner Place of Use)

Signature

Date

Print Name
(Legal Owner or Part Owner Place of Use)

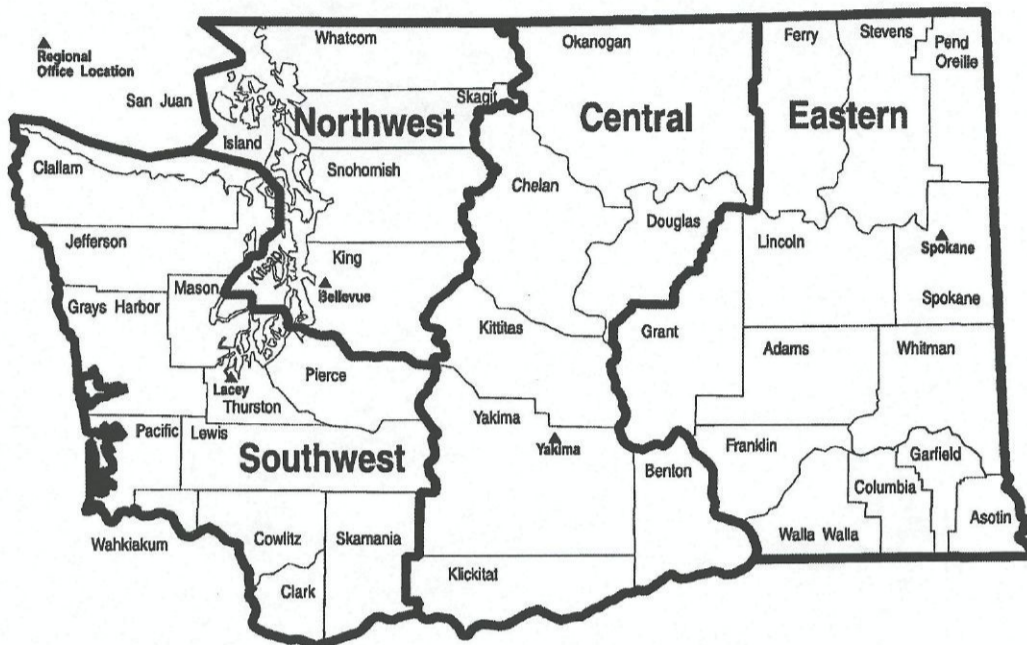
Signature

Date

Please check the region in which the project is located:

*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input checked="" type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



INSTRUCTIONS for the Application for a Water Right Permit

Please read these instructions carefully. Be accurate and complete in filling out your application, as the information you provide is very important in processing your application. Be sure to attach your fees, maps, and any additional information related to the water uses you are proposing.

If you need assistance, please contact the regional office in which your project will be located. A map of the Ecology regions is on the back page of the application. If your answers to any questions are longer than the space provided, you may attach additional sheets as necessary.

Check Boxes

Check the appropriate box for Surface or Ground Water.

Check the appropriate box for Permanent, Temporary, or Short Term use (duration of 4 months or less).

*Application Fee

- A minimum fee of \$50.00 is required for each new application for a water right permit.
- No fees are required for applications to be processed under a Cost Reimbursement contract.
- No fees are required for Emergency Drought Applications (only when a drought is declared).

If additional fees are required, Ecology will send you a letter requesting those fees. If you are unsure of the appropriate fee amount, contact your regional office for more information, or visit our website:

<http://www.ecy.wa.gov/programs/wr/rights/wr_fees.html>.

Please make checks or money orders payable to the "Department of Ecology." Cash cannot be accepted. ALL FEES ARE NONREFUNDABLE.

Section 1. APPLICANT

Enter the name of the person, organization, or water system for which the water right permit is requested. For instance, if the permit is required for a community water system, enter the name of the system (e.g. Green Acres Water Works). Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if you have one).

Provide the name of a contact person (if different from above) to call in case we have questions about the application or proposed project. Describe the relationship of the contact person to the applicant, e.g. "consultant," "water systems engineer," "realtor," "chair of community well organization," etc.